



Facts About Breast Cancer

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What You Should Know

- Breast cancer is the second most commonly diagnosed cancer in Michigan. It is the most frequently diagnosed cancer among Michigan women.¹
- Early detection is the key to survival. With regular screening, breast cancer is more likely to be detected at an earlier stage, when it is most treatable. The five-year survival rate among women whose breast cancer has not spread beyond the breast at the time of diagnosis is 97.5 percent.²
- The Michigan Cancer Consortium, the Michigan Department of Community Health, the American Cancer Society, and the American Medical Association recommend:
 - ✓ **Women age 20 and older** perform breast self-exams every month.
 - ✓ **Yearly mammograms and clinical breast exams** should be initiated for women who are not at high risk at age 40. Women also should continue to perform monthly breast self-exams.

Risk Factors

- Although every woman is at risk of developing breast cancer, several factors have been shown to increase this risk. These include: increasing age; a personal history of breast cancer; a family history of breast cancer (especially pre-menopausal onset) in a mother, a sister, a daughter, or other multiple relatives; never giving birth, or having a first child after the age of 30; and a long menstrual history. Other possible risk factors that have been suggested include: the long-term use of hormone replacement therapy; obesity; low physical activity; and alcohol consumption.³
- Approximately 5 percent to 10 percent of breast cancer is inherited, due to strong genetic factors. Most of these familial cases are due to mutations in either the BRCA-1 or BRCA-2 genes. Other gene mutations that may increase a woman's chance of developing breast cancer are mutations in ATM, CHEK-2, and p53 genes. Individuals who carry mutations in these genes also may be at an increased risk of developing other cancers.³

Incidence and Mortality

- During 2001, 7,092 women in Michigan were newly diagnosed with breast cancer.¹ During 2002, 1,508 Michigan women died of the disease.⁴
- Mortality rates associated with breast cancer have decreased in Michigan from 3.5 deaths per 10,000 women in the late 1980s to 2.7 deaths per 10,000 women in 2002.⁴ These rates are similar to the national rates.²

- The incidence and mortality associated with breast cancer vary by race. Although the incidence of breast cancer is highest among white women, breast cancer mortality rates are highest among racial minorities. African-Americans are 45.3 percent more likely than Caucasians to die from breast cancer, partly due to a later stage at diagnosis. However, even at the same stage of diagnosis, African-American women show lower survival rates.^{1,2,4}

Stage at Diagnosis

- Since the 1980s, there has been a dramatic trend toward earlier stage cancer at the first time of diagnosis. Breast cancer among Michigan women is increasingly being diagnosed at the local stage, before it has spread to other organs.¹
- During 2001, 60.1 percent of all newly diagnosed cases of breast cancer were localized; in 1985, only 46.8 percent of cases were diagnosed at this stage.¹
- During 2001, 53 percent of newly diagnosed breast cancer cases in African-American women were localized, compared with 63 percent in Caucasian women.¹
- Older women are more likely than younger women to be diagnosed with breast cancer at the local stage. Among women below 40 years of age, 51.3 percent of newly diagnosed cases were localized; among women between 40 and 64, 59.4 percent were localized; and among women 65 and older, 62.2 percent were localized.¹

Screening Behaviors

- More than 92 percent of Michigan women 20 years old and older have received at least one clinical breast exam during their lifetime.⁵

- More than 92 percent of Michigan women 40 years old and older have received at least one mammogram during their lifetime.⁵
- Among Michigan women 40 years old and older, more than 45 percent do not receive appropriately timed breast cancer screening (defined as annual mammograms and annual clinical breast exams). Women less likely to receive appropriately timed screening include women with lower education levels and women with lower household incomes.⁵

References:

1. MDCH Cancer Registry, 1985-2001
2. SEER Cancer Statistics Review, 1975-2001
3. American Cancer Society
4. MDCH Division for Vital Records & Health Statistics, 1985-2002
5. Michigan Behavioral Risk Factor Surveillance System, 2002

Screening Help for Women in Underserved Populations

Michigan's Breast and Cervical Cancer Control Program (BCCCP) provides free annual breast and cervical cancer screening and diagnostic services to underserved populations across the state.

To be eligible for the program, a woman must be at least 40 years old and have a household income that is at or below 250 percent of the federal poverty level. For example, a family of two can earn up to \$31,225 per year.

Women who are diagnosed with cancer through the BCCCP may be eligible to receive Medicaid for cancer treatment.

Call 1-800-922-MAMM for more information about eligibility requirements or participating BCCCP providers.